

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	2200	4-10-00
O.I.P.E. CLASSIFIER			7-18-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	CP	61065	6-14-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	4-10-00
2	✓	✓	4-10-00
3	✓	✓	4-10-00
4	✓	✓	4-10-00
5	✓	✓	4-10-00
6	✓	✓	4-10-00
7	✓	✓	4-10-00
8	✓	✓	4-10-00
9	✓	✓	4-10-00
10	✓	✓	4-10-00
11	✓	✓	4-10-00
12	✓	✓	4-10-00
13	✓	✓	4-10-00
14	✓	✓	4-10-00
15	✓	✓	4-10-00
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25	✓	✓	4-10-00
26	✓	✓	4-10-00
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If more than 150 claims or 10 actions
staple additional sheet here

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